

Proper Care (Cornwall) Ltd

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Proper Care is a domiciliary care agency that provides personal care to people in their own homes. The service provides support to predominantly older people who may be living with dementia and/or have a physical disability. At the time of our inspection the service was supporting over 50 people.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

People's experience of using this service and what we found

People told us they felt safe and were complimentary of the care they received. Comments from people and their relatives included, "I feel safe with them and I know I can talk to [the provider] if I need to, I'm very happy with Proper Care", "I think they are excellent and would use them again and recommend them" and "I would recommend this agency and I have recommended them to people".

The services recruitment processes were safe and staff had received appropriate training to enable them to meet people support needs. One person told us, "The carers are very good, they know what to do and they do everything I need".

The service was experiencing some staffing challenges and there was an ongoing recruitment campaign. The registered and deputy managers were regularly completing care visits. Rotas showed the service had enough staff to provide planned care visits and the registered manger told us the service only took on new packages of care when they had sufficient staff available.

People knew when to expect staff to arrive and the service's rotas were well organised and included some travel time between consecutive care visits. Staff told us, "I never run late, I take my time and have time to chat." One person commented, "We do have a rota and generally they stick to it and if the carers are going to be very late they do phone".

People were supported with the medicines safely and staff understood how to protect people from infection control risks.

Risks in relation to people's care needs and the environment had been appropriately assessed and local safeguarding procedures were well understood.

People's needs were assessed by managers before the service agreed to provide support and care plans had been updated promptly in response to reported changes in needs.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service was well-led and the registered manager and management team provided effective leadership and support to care staff. On call arrangements were effective and staff told us they were well supported.

The providers quality assurance systems were effective and action had been taken to address and resolve issues identified during our previous inspection.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was requires improvement. (Published 9 October 2021).

Why we inspected

We carried out an announced comprehensive inspection of this service on 10 September 2021. A breach of legal requirements was found in relation to governance. The provider completed an action plan after the last inspection to show what they would do and by when.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe, Effective and Well-led.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Proper care on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below

Good ●

Proper Care (Cornwall) Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

One inspector and an Expert by Experience completed this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with 5 people who used the service and 7 relatives by telephone about the quality of care the

service provided. We written feedback from 2 health and social care professionals. We also spoke with 9 members of staff, 3 managers and the registered manager. We reviewed a range of records. This included 3 people's care records, medication records, staff rotas, training and recruitment records and the provider's policies and procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection some accidents and incidents had not been appropriately documented. This had contributed to a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations.

At this inspection we found these issues had been resolved and the service was no longer in breach of the regulations.

- All accidents and incidents that had occurred had been appropriately documented and recorded. These events had been investigated and areas of learning or improvement identified.
- Risks had been managed appropriately and care plans provided staff with sufficient guidance to enable them to safely meet people's care needs. Staff told us, "If someone needs a risk assessment it gets done quickly" and "If I mention someone needs reassessing or has changed, they are very good and will get straight on it".
- Risks associated with the environment of people's homes were identified and assessed. Staff were provided with guidance on how to mitigate these risks while providing support.
- Visits were infrequently missed and all occasions where a visit was missed were investigated and action taken where possible to prevent similar events reoccurring. Staff told us, "I have never missed a visit, it does not happen often" and managers said, "We have had a couple of missed visits this year, mainly due to staff not reading the rota correctly. We have been able to send staff later".
- There were appropriate plans in place to ensure people's needs were met during periods of adverse weather or travel disruption. Staff told us, "The snow the other week was ok, a few visits were later than normal, but it was ok". The service had a lease car available for staff to use on occasions when their own vehicles were unavailable.
- The service had appropriate arrangements in place to raise concerns if lone working staff did not arrive home when expected. Staff told us, "We have a lone worker agreement in place to ensure [staff] get home safely at night".

Staffing and recruitment

At our last inspection, records in relation to staff recruitment had not been maintained as required. This contributed to a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations.

At this inspection we found these issues had been resolved and all necessary employment checks had been

completed.

- The providers recruitment practices were now safe. All necessary pre-employment checks had been completed to ensure prospective staff were suitable for employment in the care sector. This included Disclosure and Barring service (DBS) checks, full employment histories and references from previous employers in the care sector. DBS checks provide information including details about convictions and cautions held on the Police National Computer.
- The service was experiencing some staffing challenges and the registered manager and deputy managers were having to complete some care visits each week to ensure people's needs were met. There was an ongoing recruitment campaign, and the service was only taking on new packages of care when sufficient staff were available to provide all necessary visits.
- The registered manager regretted that staffing challenges, at the time of our last inspection, had meant some packages of care had been handed back to the local authority to ensure people's safety. The registered manager said, "We only take on new packages when we have the staff. It was horrible having to hand back packages and we never want to have to go back to that again".
- Staff rotas include travel time between consecutive care visits and there were enough staff available to provide all planned care visits. Staff told us, "There is plenty of travel time, the rotas make sense", "I never run late, I take my time and have time to chat" and "Rotas look sensible and include travel time".
- People received information about when staff were due to arrive and said staff normally came on time and did not rush. Comments from people and their relatives included, "They don't rush at all and they will often stay and have a little chat", "We do have a rota and generally they stick to it and if the carers are going to be very late they do phone" and "Sometimes they are late but sometimes the traffic is chaotic, if they are going to be very late they have let us know".

Using medicines safely

At our last inspection records in relation to the support people received with medicines had not been consistently completed. This had contributed to a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations.

At this inspection we found this issue had been addressed and the accuracy of medicines records had improved.

- People were safely supported with their medicines and appropriate records were now maintained detailing the level of support staff had provided. People told us, "They do my medicines, but I know exactly what I take and there have never been any problems" and "They make sure I have had my medications which is really important".
- The provider was in the process of introducing a new daily recording system designed to further reduce the risk of staff not recording when they had supported people with their medicines.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and we received consistently positive feedback about the service from people and their relatives. People said, "I feel safe with them and I know I can talk to [the provider] if I need to, I'm very happy with Proper Care" and relatives told us, "I think [My relative] is very safe with them and we are very happy with the care we have had".
- Staff understood their role in protecting people from all forms of abuse and knew how to report safeguarding concerns to the local authority. Staff told us, "People are definitely safe" and "I reported a safeguarding concern to managers and it has been alerted, the social worker is involved".

- The provider's staff disciplinary processes were robust and effective. Where concerns had been identified in relation to particular staff members, the provider had responded appropriately. Action had been taken to protect both the people and the staff members while these concerns were investigated.

Preventing and controlling infection

- Staff understood how to manage infection control risk and used PPE appropriately. Spot checks were completed to ensure current guidance was being followed.
- The service had good supplies of PPE available in the office and staff were able to collect additional equipment as required.

Learning lessons when things go wrong

- Incidents and accidents were reviewed to highlight any patterns and to prevent reoccurrence where possible. Audits were completed, and lessons learned were shared with staff to improve the service.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question good. At this inspection the rating has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- People and their relatives were complimentary of the care and support staff provided. Their comments included, "The carers are very good, they know what to do and they do everything I need", "They are trained, even the young ones know what they are doing. One was 20 years old and she was fine and knew exactly what to do" and "I think they are very well trained. They know what they are doing."
- Involved health care professionals were also complimentary of the staff team skills and told us, "The families appear happy with the care provided, current skills and visit times".
- The provider had appropriate systems and procedures in place to ensure staff had the skills necessary to meet people's needs. Staff told us, "I am up to date with my training", "I had manual handling training last Thursday and I did safeguarding and everything a couple of weeks before - last year was all online but now we are back to face to face training I think" and "I am very glad were are getting back to face to face training. I am really pleased that has started up again".
- There were effective systems in place for the induction of new members of staff to ensure they had the skills necessary to meet people's needs. All new staff initially shadowed experienced staff until they felt sufficiently confident. They were supported to complete the care certificate during their probationary period. This training is designed to provide staff with an understanding of current good practice. Records showed staff performance was regularly reviewed during probationary periods and additional guidance and support provided where necessary to help new staff gain confidence and skills. One recently recruited staff member told us, "I had 3 weeks of shadowing when I first started".
- New and established staff were actively encouraged and supported to develop skills and knowledge and complete diploma level qualifications in care. Staff told us, "I have just started my level 3 and have done the first few modules, it was one of the first thing they asked about. I think they are a very forward-thinking company".
- Staff told us they were well supported by their manager and records showed supervision and spot checks had been completed regularly. Staff comments included, "I had a supervision on Tuesday, [the manager] was there when I arrived [and observed the visit]" and "I get my supervisions and had an appraisal with [the registered manager] last year".

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed by the registered manager or another member of the service's management team before the service agreed to provide support. People's care plans were subsequently developed from information shared by commissioners and gathered during the assessment process.
- When people's needs significantly changed these assessments were reviewed and people's care plans updated. People told us, "The [registered manager] came out to do my initial assessment, he was thorough,

I believe he was a nurse" and "When I came out of hospital, [the registered manager] came out and sorted out what I needed, they look after me".

Supporting people to eat and drink enough to maintain a balanced diet

- Staff supported people to access and maintain good nutrition and hydration. Staff encouraged people to eat well and ensured people were able to access drinks and snacks between care visits.
- Care records included information about people's mealtime preferences and daily care records showed people had been offered choices in line with their preferences at mealtimes. One person told us, "The carers are good, they do my meals and they always ask, 'which one do you want', I usually say 'well I chose them all so I like them so it doesn't matter'..... They leave me a flask of tea or coffee which ever I fancy, and they do me a sandwich at tea time, it works very well."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Managers and staff communicated effectively with other agencies to help ensure people's health and care needs were met. People told us the service had been able to vary the timing of planned visits to enable them to attend health appointments and one person said, "They are flexible, I just get in touch if there is a hospital appointment or if I have to cancel an appointment".
- External healthcare professionals were complimentary of the service's performance and quality of support it provided.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The service worked in accordance with the principles of the MCA and the provider had a good understanding of this legislation. There were appropriate systems in place to record people's consent to their planned care.
- Where concerns were identified in relation to people's ability to make specific decisions best interest decision making processes had been followed.
- Staff supported people to be as independent as possible and records showed staff had respected people's decisions and choices.
- Where people had expressed preferences in relation to the gender of the care staff these choices were respected. People told us, "I didn't want male carers and I don't have any, all my carers are women" and a relative said, "We have a male carer in the evenings and [Person's name] likes that, it works very well".

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. At this inspection the rating for this key question has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection we found some records had not been accurately maintained and this was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations.

At the inspection we found the accuracy of record keeping had improved and the service was no longer in breach of the regulations.

- The accuracy of the providers record keeping had improved since our last inspection and quality assurance systems were robust and effective. People's care plans accurately reflected their current support needs and daily care records had been consistently completed.
- Since the last inspection the registered manager had regularly worked alongside staff providing care visits due to challenges with staffing levels. The registered manager told us this had impacted positively on their understanding of people's current needs and said, "I have found communication has improved. It has reduced the distance between me and the staff".
- People knew the registered manager well and told us they felt comfortable contacting the service to raise concerns or to request additional support. Comments received included, "[The registered manager] is good and approachable and I can always get hold of him. Sometimes he comes out and if they are short of staff he does a round, quite hands on", "[The registered manager] came out and introduced himself and talked to us and did a care plan with us", "Sometimes [the registered manager] comes out himself" and "The [registered] manager comes out and does rounds which is good".
- Changes had been made to the roles and responsibilities of the services' other managers since the last inspection. The provider's finance manager was now based in the office fulltime and was supporting the two deputy managers to plan and manage rotas and support staff as required. The role and responsibilities of each manger were well understood by the staff team.
- Staff told us they felt well supported and that the service's on-call arrangements were effective and enabled them to access additional support and guidance when required. Staff comments included, "We have very good bosses here", "A manager always there to help if needed" and "[The managers] in the office are wonderful, I can't praise them enough".
- The registered manager and deputy managers regularly completed unannounced spot checks to monitor the quality of support provided by individual members of staff. Team meetings were also held regularly which provided additional opportunities for staff to share learning, examples of good practice or to discuss

any concerns they had identified.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and their relatives were complimentary of Proper Care and the support it provided. Their comments included, "I think they are excellent and would use them again and recommend them", "The carers are really wonderful with [My relative]", "We are very happy with the care provided and all the carers are very helpful" and "I would recommend this agency and I have recommended them to people".
- Involved health and social care professionals also praised the service's culture and the quality of support provided. Their comments included, "I usually find Proper Care very responsive and supportive towards their clients" and "The team leaders that we deal with when reviewing packages always seem to know the patients and what's happening with them".
- Staff recognised the service's performance had improved since our last inspection and that the changes to the service's management arrangements had impacted positively on performance. Their comments included, "The last year has been hard but is definitely getting better and we feel more of a team", "It is good place to work, I think it has got a bit better because you don't have the cliqueness (sic) that was here before. Now it is a lot better" and "Things are a lot better. It is definitely not like it was".

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager had a good understanding of the requirements of the duty of candour and shared information proactively and appropriately with people's relatives when necessary.
- People and their relatives told us the service communicated effectively and openly. Their comments included, "They people in the office are very nice and helpful and if I needed anything I would talk to them" and "The office are always very helpful nothing is too much trouble".
- The service's managers participated positively in the inspection process and all information requested was provided promptly.

Continuous learning and improving care; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider regularly gathered feedback from people and relatives via spot checks, reviews, and an annual survey. People's feedback was consistently complimentary, and the results of the most recent survey were very positive. People's comments in responses to the survey included, "Carers are professionals and friendly" and "The service you give is good and allows me to have dignity and live as normal a life as possible".
- Where people had reported concerns or issues these had been fully investigated and action taken to improve the service's performance. People told us, "I don't have any complaints at all", "I phone the office if there is a problem – they are very easy to talk to" and "We did have a carer who I did not get on with and I asked not to have them, they didn't send them anymore."
- Staff recognised how important it was for people to feel comfortable with their care staff and told us, "I know the office staff bend over backwards to support people. And they make changes where people and staff don't get on. This is incredibly personal what we do, going into people's own homes. I love it here and I want to stay here as long as they will have me".
- The registered manager had a detailed understanding of equality issues and acted to ensure everyone using the service and all staff were protected from discrimination. Staff told us the registered manager was, "kind and supportive" and said "They look after me and I look after the people we support."

Working in partnership with others

- The service worked with health care professionals to support and enable people to continue living at home safely. Where significant changes in people's needs or wellbeing were identified this information had been shared promptly and appropriately with involved healthcare professionals.